

CHRD 2022: Abstract & Poster Submission Form

Submitter Name

Megan Moorhouse

Submitter Email

mmoorhouse@manitoba-physicians.ca

Presenter Status

- O Undergraduate Students
- **O** Masters Student
- O PhD Student
- O Post-Doctoral Fellows
- Residents
- O Non-Trainee

Research Category

- O Basic Science
- Clinical
- O Community Health / Policy

Role in the project

Design

- □ Perform Experiments
- ☑ Analyze Data
- Write Abstract

Title

Prevalence and risk factors for depression among parents of children born preterm: A systematic review of the evidence since 2000

Background

The birth of a preterm baby can result in substantial stress to the parents potentially impacting their mental health.

Objective

This systematic review aims to summarize the prevalence and risk factors of depression among both mothers and fathers of children born preterm in the first one to five years following preterm birth.

Methods

Peer reviewed, observational studies, identified through a systematic literature search, were independently screened by two reviewers for eligibility. Studies assessing the prevalence and risk factors for depression, among parents of preterm children (defined as < 37 weeks), were included. Studies using birth weight alone or only combined parental data or whose focus was on neonatal death, genetic or congenital abnormalities were excluded. Meta analyses were performed for pooled prevalence and odds ratios using inverse variance effects models.

Results

Seventy-eight studies were included in the systematic review. Majority of them were in English language, cross sectional in design, recruited mothers (n=62) mostly from hospitals (n=54). The prevalence of depression among mothers of preterm infants in the first year of life was 25.4% [95%CI: 20.6%; 30.8%], and 20.2% [13.1%; 29.9%] in years two through five; In fathers of preterm infants the prevalence of depression was 13.4% [7.9%; 21.7%] in the first year, and 11.1% [1.5%; 50%] in years two through five. Mothers from the African and Eastern Mediterranean regions, and fathers from Western Pacific region had a higher prevalence of depression compared to other regions. Relationship difficulties OR 3.50[1.88,6.50], and low educational status OR 18.08[2.16, 151.10] significantly increased the risk of depression among mothers.

Conclusion

This systematic review has important implications with regards to the care of parents of preterm infants. Knowing the prevalence and risk factors for depression allows us as healthcare professionals to better care for our patients and for systems to allocate resources equitably.

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Authors

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Name	Email	Role	Profession
Megan Moorhouse	mmoorhouse@manitob a-physicians.ca	Presenting Author	Graduate

Piranavi Jeyagaran	pjeyagaran@mail.sjsm. org	Co Author	Graduate
James Bolton	JBOLTON@hsc.mb.ca	Co Author	Full Professor
Nicole Askin	Nicole.Askin@umanitob a.ca	Co Author	Other
Kristene Cheung	kcheung6@hsc.mb.ca	Co Author	Assistant Professor
George N Okoli	George.Okoli@umanito ba.ca	Co Author	Other
Deepak Louis	dlouis@hsc.mb.ca	Co Author	Assistant Professor